OMB Control No. 1076-0180 Exp Date: 01/31/2020



## Bureau of Indian Affairs, Osage Agency <u>Self-Certification Form</u>

Lessee Contact Information:		
Company Name:	Phone Number:	
Address:		
City:	State:	Zip:
Information Supplied by the BIA:		
Reference ID (Internal Use Only):	Legal Description:	
BIA Lease Number:	Compliance Due Date:	
I certify that I have corrected all violations and lease deficiencies related to the above described lease, as listed in Notices of Deficiency and/or Orders of the Superintendent served upon me, and that the lease is now in compliance with the regulations found at 25 CFR Part 226. I have attached photos and other documentation necessary to show that that the work was in fact completed and the date it was completed.  I acknowledge that, if any violation or lease deficiency has not been corrected by the time of the final inspection, BIA may assess fines and penalties pursuant to 25 CFR 226.42 and 25 CFR 226.43(j), or that other enforcement action may be taken.		
Name (Printed)		
Signature		
Date		